

CLAIMS ONLY							Application Number <u>1006847</u> Filing Date	
							Applicant(s)	
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51	
2		1					52	
3		1					53	
4		1					54	
5							55	
6							56	
7							57	
8							58	
9							59	
10							60	
11		1					61	
12		1					62	
13	1						63	
14		1					64	
15	1						65	
16		1					66	
17							67	
18							68	
19	1						69	
20		1					70	
21							71	
22							72	
23							73	
24							74	
25							75	
26							76	
27							77	
28							78	
29							79	
30							80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep							Total Indep	
Total Depend							Total Depend	
Total Claims							Total Claims	